AMENDMENTS TO THE CLAIMS

Docket No.: 101896-234 (DEP5100CIP)

 (Previously Presented) A tissue retractor and guide device, comprising: an elongate member having proximal and distal portions, the distal portion including a surface adapted to retract tissue; and

a guide member coupled to the distal portion of the elongate member and having first and second pathways extending therethrough for receiving a tool, the pathways having central longitudinal axes that are substantially parallel to at least a portion of a front surface of the distal portion of the elongate member, and having a cut-out portion extending between the first and second pathways, the guide member being adapted to be positioned in relation to a spinal implant such that each of the pathways in the guide member is aligned with at least one corresponding bore formed in the spinal implant to guide a tool through the bore and the cut-out portion provides visual access to the spinal implant.

- (Original) The device of claim 1, wherein the guide member has a width that is equal to or less than a width of at least a portion of the distal portion of the elongate member such that the distal portion of the elongate member is effective to retract tissue disposed adjacent to the guide member.
- (Original) The device of claim 1, wherein the guide member is adapted to be juxtapositioned on the spinal implant.
- (Original) The device of claim 1, wherein the surface on the distal portion of the elongate member is substantially planar.
- 5. (Original) The device of claim 1, wherein the guide member includes front and back opposed sidewalls, and opposed lateral sidewalls extending between the front and back sidewalls, the back sidewall of the guide member being coupled to the elongate member.
- (Original) The device of claim 5, wherein the distal portion of the elongate member is positioned at an angle with respect to the back sidewall of the guide member.

Reply to Office Action of March 4, 2010

(Cancelled).

8. (Previously Presented) The device of claim 1, wherein the pathways are positioned at an

angle with respect to one another.

(Cancelled).

10. (Previously Presented) The device of claim 1, wherein the cut-out portion is formed in a

front sidewall of the guide member between the two pathways.

11. (Original) The device of claim 10, wherein the cut-out portion extends from the proximal

end to the distal end of the guide member.

12. (Previously Presented) The device of claim 5, wherein the opposed lateral sidewalls of the

guide member are substantially C-shaped.

13. (Previously Presented) The device of claim 5, further comprising at least one extension

portion extending distally from the guide member and adapted to align the first and second

pathways in the guide member with corresponding bores formed in a spinal implant.

14. (Original) The device of claim 13, wherein the at least one extension portion comprises first

and second tabs extending from the opposed lateral sidewalls of the guide member.

15. (Original) The device of claim 14, wherein each tab has a substantially concave inner

surface that is adapted to be positioned against a substantially concave outer surface formed on a

perimeter of a spinal implant.

16. (Original) The device of claim 13, wherein the at least one extension portion extends

distally from the back sidewall of the guide member.

Reply to Office Action of March 4, 2010

17. (Original) The device of claim 16, wherein the at least one extension portion is formed on the distal portion of the elongate member and it extends a distance beyond a distal-most end of the guide member.

- (Original) The device of claim 16, wherein a distal-most surface of the extension portion is 18. substantially concave to match the contour of a vertebral body.
- 19-26. (Cancelled).
- (Original) The device of claim 1, wherein the proximal portion of the elongate member is 2.7 positioned at an angle with respect to the distal portion of the elongate member.
- (Original) The device of claim 27, wherein the angle is in the range of about 110° to 160°. 28.
- (Original) The device of claim 1, wherein the proximal portion of the guide member 29 includes a clamp member adapted to mate to an external support.
- (Original) The device of claim 1, wherein the proximal portion of the guide member 30. includes a post adapted to attach to a clamp member on an external support.
- (Currently Amended) A tissue retractor and guide device, comprising: 31 an elongate member having a proximal portion and a distal portion that is adapted to retract tissue; and
- a guide member coupled to the distal portion of the elongate member and adapted to be juxtapositioned on a spinal implant, the guide member including at least one pathway extending therethrough for receiving a tool, and at least one cut-out portion in a front sidewall of the guide member adapted to provide visual access to the spinal implant, the at least one cut-out portion extending from a proximal end of the guide member to a distal end of the guide member, and the at least one pathway having a central longitudinal axis that extends in a proximal-distal direction and that is substantially parallel to a plane containing the front sidewall of the guide member, the plane

of the front sidewall extending in a proximal-distal direction.

32. (Original) The device of claim 31, wherein the guide member includes front and back opposed sidewalls, and opposed lateral sidewalls extending between the front and back sidewalls,

the back sidewall of the guide member being coupled to the elongate member.

33. (Original) The device of claim 32, wherein the guide member includes two pathways

extending therethrough.

34. (Previously Presented) The device of claim 33, wherein the cut-out portion is formed in the

front sidewall between the two pathways.

35. (Canceled).

36. (Original) The device of claim 32, wherein the opposed lateral sidewalls of the guide

member are substantially C-shaped.

37. (Currently Amended) A tissue retractor and guide kit, comprising:

first and second tissue retractor and guide devices adapted to couple to a spinal implant, the

first and second devices having

a guide member having opposed front and back sidewalls, opposed lateral sidewalls

extending between the front and back sidewalls, and at least one pathway first and second pathways

formed therein for receiving a tool, and

an elongate member having a proximal, handle portion, and a distal, tissue-retracting

portion coupled to the back sidewall of the guide member; and

a cross member removably and reattachably connected to the first and second tissue retractor

and guide devices.

38. (Original) The kit of claim 37, wherein the cross member comprises a substantially

rectangular housing.

Application No. 10/777,019 Docket No.: 101896-234 (DEP5100CIP)
Reply to Office Action of March 4, 2010

39. (Previously Presented) The kit of claim 37, wherein the cross member comprises an elongate rod having opposed ends, each end being adapted to removably mate to a tissue retractor and guide device.

- 40. (Previously Presented) A spinal fixation kit, comprising:
 - a spinal fixation plate having
- a superior portion with at least one bore formed therein for receiving a fixation device effective to mate the superior portion to a first vertebra, and
- an inferior portion with at least one bore formed therein for receiving a fixation device effective to mate the inferior portion to a second, adjacent vertebra; and
- at least one tissue retractor and guide device adapted to be juxtapositioned on the spinal fixation plate, the at least one tissue retractor and guide device having
- a guide member having opposed front and back sidewalls, opposed lateral sidewalls extending between the front and back sidewalls, and first and second pathways formed therein for receiving a tool, at least a portion of the first and second pathways being in communication with one another, and
- an elongate member having a proximal, handle portion, and a distal, tissue-retracting portion coupled to the back sidewall of the guide member;

wherein the first and second pathways have central longitudinal axes that extend substantially parallel to at least a portion of the distal, tissue-retracting portion of the elongate member and that do not intersect any portion of the elongate member, and wherein at least one of the first and second pathways in the guide member is aligned with a bore formed in the spinal fixation plate when the guide member is juxtapositioned on the spinal fixation plate.

- 41. (Previously Presented) The kit of claim 40, wherein the first and second pathways are adapted to be aligned with two adjacent bores formed in at least one of the superior portion and the inferior portion of the spinal fixation plate.
- 42. (Original) The kit of claim 41, wherein the pathways are positioned at an angle with respect

Reply to Office Action of March 4, 2010

to one another.

43. (Original) The kit of claim 41, further comprising at least one cut-out portion formed in the guide member and adapted to provide visual access to a spinal implant coupled thereto.

44. (Previously Presented) The kit of claim 40, wherein the guide member includes a cut-out

portion formed in the front sidewall between the first and second pathways.

45. (Original) The kit of claim 44, wherein the cut-out portion extends between the proximal

and distal ends of the guide member.

46. (Original) The kit of claim 44, wherein the opposed lateral sidewalls of the guide member

are substantially C-shaped.

47. (Previously Presented) The kit of claim 41, further comprising first and second tabs

extending distally from a distal-most end of the guide member, the tabs being adapted to align the

pathways in the guide member with bores formed in the spinal fixation plate.

48. (Original) The kit of claim 47, wherein the first and second tabs extend from the back

sidewall of the guide member.

49. (Original) The kit of claim 47, wherein each tab has a substantially concave inner surface

that is adapted to be positioned against a substantially concave outer surface formed on a perimeter

of a spinal fixation plate.

50. (Original) The kit of claim 47, wherein a distal-most surface of each tab is substantially

concave to match the contour of a vertebral body.

51. (Original) The kit of claim 40, wherein a distal-most end of the elongate member extends a

distance beyond a distal-most end of the guide member to form an extension portion, the extension

Application No. 10/777,019 Docket No.: 101896-234 (DEP5100CIP)
Reply to Office Action of March 4, 2010

kepty to Ornce Action of March 4, 2010

portion being adapted to rest against a perimeter of the spinal fixation plate to align the guide

member with the spinal fixation plate.

52. (Original) The kit of claim 40, wherein a distal end of the guide member has at least one

mating element formed thereon and adapted to mate with a corresponding mating element formed

on the spinal fixation plate.

53. (Original) The kit of claim 52, wherein the at least one mating element has a shape that is

adapted to prevent rotation of the guide member with respect to the spinal fixation plate when the

guide member is positioned on the spinal fixation plate.

54. (Original) The kit of claim 40, wherein the superior and inferior portions of the spinal

fixation plate are slidably movable with respect to each other between a retracted position and an

extended position.

55. (Original) The kit of claim 54, further comprising a cross member effective to mate two

tissue retractor guide devices to one another, and to maintain the spinal fixation plate in the

extended position when the devices are mated to the superior and inferior portions of the spinal

fixation plate.